

POSITION	INITIALS	ID NO.	DATE
	mm G		9/27/00
FEE DETERMINATION			
O.I.P.E. CLASSIFIER	ASD		12/1/00
FORMALITY REVIEW	JW	68746	11-9-00
RESPONSE FORMALITY REVIEW			

### INDEX OF CLAIMS

✓	Rejected	N	Non-elected
=	Allowed	I	Interference
-	(Through numeral) Canceled	A	Appeal
÷	Restricted	O	Objected

Claim	Final	Original	Date
1	✓	✓	1-3/19/04
2	✓	✓	5/21/04
3	✓	✓	
4	✓	✓	
5	✓	✓	
6	✓	✓	
7	✓	✓	
8	✓	✓	
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49	✓	✓	
50	✓	✓	

Claim	Final	Original	Date
51	✓	✓	5/21/04
52	✓	✓	
53	✓	✓	
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100	✓	✓	

Claim	Final	Original	Date
101	✓	✓	
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106	✓	✓	
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147	✓	✓	
148	✓	✓	
149	✓	✓	
150	✓	✓	

If more than 150 claims or 10 actions  
staple additional sheet here

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